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FISCAL IMPACT REPORT



SPONSOR: Knauer DATE TYPED: 1/24/02 HB 72

SHORT TITLE: Breast & Cervical Cancer Services SB _____

ANALYST: Dunbar

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY02	FY03	FY02	FY03		
	\$1,600.0			Recurring	General Fund
			\$36.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

REVENUE

Estimated Revenue		Subsequent Years Impact	Recurring or Non-Rec	Fund Affected
FY02	FY03			
	\$7,289.0		Recurring	Federal Funds
	\$164.0		Recurring	Federal Funds

(Parenthesis () Indicate Revenue Decreases)

SOURCES OF INFORMATION

Responses Received From

Human Services Department (HSD)

SUMMARY

Synopsis of Bill

HB 72 appropriates \$1,600.0 from the general fund to the Health Department to provide matching funds pursuant to the federal Breast and Cervical Cancer Prevention and Treatment Act of 2000 to provide Medicaid eligibility to uninsured women who are under age 65.

These women must be identified through the Centers for Disease Control and Prevention's National Breast and Cervical Cancer Early Detection program. Moreover, to be eligible for this program a person must not have health insurance or be eligible for Medicaid.

Significant Issues

Coverage includes cancer treatment, as well as the full range of Medicaid benefits. Program will assure access to timely treatment services and reduce mortality from cancer.

HSD'S Medical Assistance Division (MAD) and the Department of Health (DOH) report that up to 850 women would be eligible to participate in this program each year in New Mexico.

PERFORMANCE IMPLICATIONS

MAD has implemented performance measures that look at the percentage of women enrolled in New Mexico Medicaid who are receiving breast and cervical screens.

FISCAL IMPLICATIONS

The appropriation of \$1,600.0 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY 03 shall revert to the general fund.

The federal fiscal participation (FFP) for this program is equal to the enhanced FFP for the State Children's Health Insurance Program (SCHIP), currently about 82%. The \$1,600.0 would generate \$7,289.0. in federal Medicaid dollars, for a total of approximately \$8,889.

ADMINISTRATIVE IMPLICATIONS

There is no mention of an appropriation for administrative start-up costs. Implementation of a new Medicaid category would require programming changes to the Medicaid Management Information System (MMIS) and the Income Support Division on-line eligibility (ISD2) system, as well as policy promulgation and training costs. HSD estimated costs are \$ 200.0. The state share of such costs would be at the 82% FFP.

BD/njw